SB 226 -2 STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

Prepared By: Brian Nieubuurt, LPRO Analyst **Meeting Dates:** 4/26, 5/3

WHAT THE MEASURE DOES:

Removes requirement that Oregon State Board of Nursing notify State Board of Pharmacy upon approval of application by nurse practitioner or clinical nurse specialist to dispense prescription drugs. Takes effect on 91st day following adjournment sine die.

FISCAL: No fiscal impact

REVENUE: No revenue impact

SENATE VOTE: Ayes, 29; Excused, 1

ISSUES DISCUSSED:

- Differences in authority to dispense versus prescribe prescription drugs
- Current prohibition on nurses practicing in long term care settings from executing medical orders from out-of-state physicians

EFFECT OF AMENDMENT:

-2 Permits registered nurse employed by or contracted with long term care facility or in-home care agency to execute medical order from physician licensed in another state if order is related to care of person who has been patient of facility or agency for less than 90 days.

FISCAL: No fiscal impact

REVENUE: No revenue impact

BACKGROUND:

The Oregon State Board of Nursing (OSBN) regulates the practice of nursing in the state, including licensing or certifying registered nurses (RN), licensed practical nurses (LPN), clinical nurse specialists (APRN-CNS), certified registered nurse anesthetists (APRN-CRNA), nurse practitioners (APR-NP), certified nursing assistants (CNA), and certified medication aides (CMA). Advanced practice nurses (CNS, CRNA, and NP) may be authorized to prescribe drugs. Oregon law currently requires OSBN to immediately notify the State Board of Pharmacy when approving an application by an NP or CNS to dispense prescription drugs.

Senate Bill 226 would remove the requirement that the Oregon State Board of Nursing notify the State Board of Pharmacy upon approval of an application by a nurse practitioner or clinical nurse specialist to dispense prescription drugs.